## HRSA Area Health Education Consortium (AHEC) 2017 Competition

**Applicant organization:** OSU Center for Health Sciences **Due**: March 29, 2017

**Duration**: 5 years (9/1/17 – 8/31/22)

**Funding**: Approximately \$187,500/Center per year, includes 8% indirect

• 100% match required, 25% in cash (see attached cost allocation document)

Purpose: Develop and enhance health professional education and training networks

AHEC supports 3 overarching goals emphasizing rural and underserved areas and populations:

- 1. Diversity: Prepare a representatively diverse, culturally competent primary care workforce
- 2. Distribution: Improve workforce distribution throughout the nation
- 3. <u>Practice Transformation</u>: Develop and maintain a health care workforce prepared to deliver high quality care in a transforming health care delivery system

# **Educational and Training Activities**—

- 1. **AHEC Scholars Program**: Longitudinal, interdisciplinary curricula implementing clinical, didactic, and community-based training in rural/underserved areas. (see details on next page)
- 2. **Community-based Experiential Training**: Field placements and clinical rotations for health students outside of AHEC Scholars Program. Each training must be team-based and include a formal, didactic component addressing one or more Core Topic Areas.
- 3. **Core Topic Areas**: All educational and training activities must support the 6 Core Topic Areas (Youth Pipeline activities exempt.):
  - a. <u>Inter-professional Education</u> (i.e., interdisciplinary training) coordinated, patient-centered model of care involving an understanding of contributions of multiple health professionals
  - b. <u>Behavioral Health Integration</u> development of integrated primary and behavioral health services to better address the needs of individuals
  - c. <u>Social Determinants of Health</u> 5 key areas [Economic Stability, Education, Social and Community Context, Health and Health Care, and Neighborhood and Built Environment]
  - d. <u>Cultural Competency</u> improve individual and community health by training providers to recognize and address diverse cultures, languages, and health literacy
  - e. <u>Practice Transformation</u> training activities for skills needed for quality improvement and patient-centered care, e.g., goal-setting, leadership, practice facilitation, workflow changes, measuring outcomes, adapting tools and processes to support team-based care
  - f. <u>Current and emerging health issues</u> (e.g., Zika virus, pandemic influenza, opioid abuse, geographically relevant health issues, etc.) may be proposed
- 4. **Pipeline Activities**: Recruitment, training, interactive, and/or didactic activities that expose for high school students (grades 9-12) to health careers, including public health. Use <u>no more than 10 percent of the total award</u> for these activities, which may include, but are not limited to
  - a. Afterschool enrichment activities, community-based outreach and education, precollege preparation, and pre-certification preparation activities.
- 5. **Continuing Education**: Recipients must support didactic and experiential training activities focused on the Core Topic Areas developed for currently practicing health professionals. Use <u>no</u> more than 10 percent of the total award for these activities.

## **AHEC Scholars Program**—Requires:

- Collaborative development of curriculum by award recipient, Centers and community partners
- Stipends (max \$2K/student for program duration) to cover
  - o living expenses, school supplies, travel/job supplies/needs, e.g., continuing education
- Cohorts of 15-25 new students per Center each academic year
  - o Cohorts must be multi-disciplinary, e.g., medicine, allied health, nursing, etc.
- Formal application process with defined eligibility criteria to ensure diversity among Scholars
  - Acceptance should be congruent with existing health professions program requirements
- Cohorts last for minimum of 2 years (with exceptions for health professions programs < 2 years)</li>
- Discipline-specific defined points of entry and exit
- Interdisciplinary learning objectives and outcomes
- Culminate in completion or graduation from a degree or certificate program
- One-year follow-up after graduation or completion of health program
- Strategic partnerships to support successful implementation
- Community-based, experiential, or clinical training in rural and/or underserved setting
  - Minimum of 40 hours must consist of team-based training
- Minimum 40 hours/year of didactic educ. (incl. innovative and/or interactive learning activities)
  - o beyond health program requirements and focused on AHEC Core Topic Areas
- Collect and track individual-level data on AHEC Scholars

## **AHEC Cost Allocation between Centers and Program (Applicant)**

HRSA AHEC 9/1/17 - 8/31/22							
		Max per		Min to		Max to	
PER YEAR		Center		Centers (75%)		Applicant (25%)	
Grant funds							
Direct costs	·	\$	231,481	\$	173,611	\$	57,870
Indirect costs	8%	\$	18,519	\$	13,889	\$	4,630
Grant Total		\$	250,000	\$	187,500	\$	62,500
Match required	100%						
Cash required	25%	\$	62,500	\$	46,875	\$	15,625
Non-cash acceptable	75%	\$	187,500	\$	140,625	\$	46,875
Match Total		\$	250,000	\$	187,500	\$	62,500
GRAND TOTAL		\$	500,000	\$	375,000	\$	125,000

### Notes:

- 1. Centers must have a minimum .75 FTE Center Director
- 2. In-kind match may include:
- \* in-kind time & effort
- \* unrecovered indirect costs
- \* allowable third-party donated items or services
- \* program income